## CITY OF GLENDALE - BUILDING AND SAFETY



633 E. Broadway, Room 101 Glendale, CA 91206 (818) 548-3200, (818) 548-4830 (Inspection)

## PLUMBING PERMIT WORKSHEET

Please complete the section below clearly, legibly and in ink.

Permit No. BP\_\_\_\_\_

Work Description (Fill all hat apply and specify quantity )	ALL RATED WALLS & FLOORS SHALL BE SHOW!	N ON THE PLUMBING PLAN	s prior to sui	BMITTAL. I	identify the rating and loc	ATION OF ALL PENETRATION			
Permit Information In State of the Application of State of the Control of State of the Application of State of St	Job Address ( Include Zip Code )		Work D	escription	( Fill all that apply and specify o	quantity )			
Permit information on Building Has work classrated   very company   very continued   very company   very compan				\$50.00	Issuance Fee				
Permit information on Building Has work classrated   very company   very continued   very company   very compan				Yes	No 15% Energy surcharge				
Specified State   Specified Complete the permit few will be charged on t	l			Yes 🔲	No 15% Green Building surcharge				
Describe where the work will be chose & fill out the work description on the right value of the application.		<b>∟</b>		\$75.00 Min	imum Inspection Fee (If the total ins	spection fees equal less than the			
Describe work will be done & fill out the work description on the right will of the septiment of the septime		n ree v be enarged							
Social Continues   Supplemental Permit to   Plan Check (50% of Permit Fee, Minimum of \$77.50)		vork description on the right							
Applicant 's Name	side of this application.				_ ''				
Silian   Solve   Sol				, *		Minimum of \$77.60)			
Address (Include City and Zip Code)  E Mail Address (Include City and Zip Code)  E Mail Address (Include City and Zip Code)  E Mail Address (Include City & Zip Code)  License Mo.  Licens	Applicant 's Name	Phono		¢11 90	<del>-</del>	παπ στ φ. 7σσ,			
S11.80 Sehthub  S11.80 Sentrub  S11.80 Dahwasher  Froperty Dawnae's name  Phone  (1) S11.80 Sentrub  S11.80 Dahwasher  Froperty Dawnae's name  (2) S11.80 Dahwasher  S8.30 Packetiselle Water Softerer  Lawn Sprinker Softerer  Lawn Sprinker Softerer  S8.30 Derivation  S11.80 D	Applicant 3 Nume								
Sinus   Shower/Shower Pan   Shower/Shower Pan   Shower/Shower Pan   Shower/Shower Pan   Shill   Shill   Shower/Shower Pan   Shill		,	-	• .					
E Mail Address:    S11.80   Garbage Disposal   Any Combrastion   A	Address (Include City and Zip Code )	<b>-</b>							
S. Mail Address    S. Hall Add				• .					
Siliano   Control vasaria	E Mail Address:				' '				
Property Owner's name    Phone	E-Mail Address.		l	\$11.80					
Address (Include City & Zip Code)  E-Meil Address:  E-Meil Address:    Siliab   Sili				\$11.80	Dishwasher				
Definition of the Business and Professions Code, and my license is in full force and wifeten pools of perjury that I am licensed under provisions of Chapter 9 (commencing with full force) and wifeten pools of perjury that I am licensed under provisions of Chapter 9 (commencing with full full force) and wifeten pools of perjury that I am licensed under provisions of Chapter 9 (commencing with full full full full full full full ful	Property Owner's name	Phone		\$18.50	Residential Water Softener	requires plan check (")			
Sil		( )		\$8.30	Lawn Sprinkler System				
E-Mail Address:    Salt	Address (Include City & Zip Code)				0 - 5 (Vacuum Breaker)				
Licensed design professional or engineer information:	, , , , , , , , , , , ,			\$11.80	Drinking Fountain				
Licensed design professional or engineer Information:    Sill				\$24.20	Water Heater (each and/or vent)				
Licensed design professional or engineer information: Name    Phone	E-Mail Address:		-		` '				
License design professional or engineer information:   Simple   State			-						
Phone	Licensed design professional or engineer Infor	mation:							
Address (Include City & Zip Code)  License No.  E-Mail Address:  E-Mail Address:  CALIPORNIA LICENSED CONTRACTOR'S DECLARATION: I heeby affirm under penalty of perjury that I am Reensed under provisions of Chapter (Commencing with section 7000) of Division 3 of the Business and Professions Code, and my Reense is in full force and effect.  Contractor's Name  E-Mail Address:  COMPANY NAME  E-Mail Address:  COMPANY NAME  E-Mail Address:  Re-pipes (Rinclude City & Zip Code)  E-Mail Address:  Re-pipe (Multi-Family Dwelling)  For OFFICE USE ONLY  AFIN  Lot  Processed Below Grade  Mezz  Const.  For Above Grade  Below Grade  Mezz  Const.  Receipt No.  E-Mail Address:  Receipt No.  For Processed By:  Date:  Receipt No.  Receipt No.  Saso 300  Detail Charis, Each (*)  Sanity Detailed, Proceed Equipment (*)  Miscellaneous Items, Each  Misce									
Industrial Equipment   \$77.60   Grease Trap (*)   Grease Trap (*)   \$77.60   Greate Trap (*)   \$77.6		( )	—			epiacement			
E-Mail Address:	Address (Include City & Zin Code)	License No	<del></del>						
E-Mail Address:  CALIFORNIA LICENSED CONTRACTOR'S DECLARATION: I herby affirm under penalty of perlyry that I am licensed under provisions of Chapter 9 (commencing with section 7050) of Division 3 of the Business and Professions Code, and my license is in fail force and effect.  COMPANY NAME  Phone ( )  Address (include City & Zip Code)  E-Mail Address:  E-Mail Address:  Re-pipes (Single Family Dwelling) WATER SYSTEMS ONLY  1 Bathrooms or Kitchen 2 S33.00  Sastrooms or Kitchen 2 S35.30  3 Bathrooms or Kitchen 3 Special Equipment, Per Piece of Equipment (*)  Special Equipment (*)  Special Equipment (*)  Special Equipment (*)  Spe	Address (medde eity & zip code)	Electise 140.	Industr						
SS,00   Backflow Protective Device, Each   So,00   Dental Chairs, Each (*)   Dental Chairs, Each (*)   Dental Chairs, Each (*)   So,00   So,00   Dental Chairs, Each (*)   So,00   S									
CALIFORNIA LICENSED CONTRACTOR'S DECLARATION: 1 herby affirm under penalty of perity that 1 am licensed under provisions of Chapter 9 (commencing with full force and affect).  Solution of the Business and Professions Code, and my license is in Still 80.  Contractor's Name  COMPANY NAME  Phone  COMPANY NAME  C	E-Mail Address:			\$77.60	Grease Trap (*)				
penalty of perjury that I am Icensed under provisions of Chapter 9 (commencing with section 7000) of Division 3 of the Business and Professions Code, and my license is in 511.80  Sincellaneous Items, Each Miscellaneous Items, Each Items, Despire Items, Items, Items, Each Miscellaneous Items, Each Items, Items, Items, Items, Items, Items, Items, Items, Each Miscellaneous Items, Each Items, Items				\$5.90	Backflow Protective Device, Each				
Silence   Sile	CALIFORNIA LICENSED CONTRACTOR'S DECLA	RATION: I herby affirm und	er	\$30.10	Dental Chairs, Each (*)				
FOR OFFICE USE ONLY  APP  Comtractor's Signature  E-Mail Address:  B-Mail Address:  Re-pipe (Multi-Family Owelling - Per Unit) WATER SYSTEMS ONLY  S99.50				\$30.10	Special Equipment, Per Piece of Equipment (*)				
Re-pipes (Single Family Dwelling) WATER SYSTEMS ONLY  S35.50 1 Bathroom or Kitchen  \$535.50 2 Bathrooms or Kitchen  \$535.50 3 Bathrooms  \$535.50 4 or More Bathrooms  \$535.50 4 or More Bathrooms  \$535.50 5 Bathrooms  \$535.50 5 Bathrooms  \$535.50 5 Bathrooms  \$535.50 6 Bathrooms  \$535.50 7 Bathrooms  \$53		ofessions Code, and my lice	nse is in   ——	\$11.80	Miscellaneous Items, Each				
COMPANY NAME ( )  Address (Include City & Zip Code)  E-Mail Address:  E-Mail Address:  E-Mail Address:  E-Mail Address:  State License No.   Exp. Date   City License No.   Exp. Date   S93.50   Sathrooms or kitchen (Per Dwelling Unit)   S93.50   Greater than 2 Bathrooms or Kitchen (Per Dwelling Unit)   Re-pipe (Non - Residential - Per Floor or Story)   WATER SYSTEMS ONLY   S98.50   Less Than 10,000 Sq. Ft. (Per Floor or Story)   S180.00   S93.01   S9		Di			Family Dwelling) WATER SYSTEM	AS ONLY			
Address (Include City & Zip Code)  E-Mail Address:  Sep. Date   State License No.   Exp. Date   City License No.   Exp. Date   State License No.   Exp. Date   City License No.   Exp. Date   State License No.   Exp. Date   City License No.   Exp. Date   State License No.   S						<u></u>			
### State License No.   Exp. Date   City License No.   Exp. Date   Sep.	COMPANT NAME								
E-Mail Address:  State License No.   Exp. Date   City License No.   Exp. Date   S72.20   Zathrooms or kitchen (Per Dwelling Unit)    Re-pipe (Multi-Family Dwelling - Per Unit)   WATER SYSTEMS ONLY    \$72.20   Zathrooms or Kitchen (Per Dwelling Unit)    Re-pipe (Non - Residential - Per Floor or Story)   WATER SYSTEMS ONLY    \$89.50   Less Than 10,000 Sq. Ft. (Per Floor or Story)    \$89	Address (Include City & Zip Code)		-						
Re-pipe (Multi-Family Dwelling - Per Unit) WATER SYSTEMS ONLY  \$72.20 2 Bathrooms or less or Kitche (Per Dwelling Unit) \$89.50 Cereter than 2 Bathrooms or Kitchen (Per Dwelling Unit) \$89.50 Less Than 10,000 Sq. Ft. (Per Floor or Story) \$180.00 10,001 Sq. Ft 100,000 Sq. Ft. (Per Floor or Story) \$180.00 10,001 Sq. Ft 100,000 Sq. Ft. (Per Floor or Story) \$298.70 Greater Than 100,000 Sq. Ft. (Per Floor or Story) \$298.70 Greater Than 100,000 Sq. Ft. (Per Floor or Story) \$298.70 Greater Than 100,000 Sq. Ft. (Per Floor or Story) \$298.70 Multi-Family or Mix Use: Kitchen & up to one Bathroom \$30.10 Multi-Family & Mix Use: Additional Bathrooms \$30.10 Wellim Pressure, Each Outlet \$77.60 Medium Pressure, Each Outlet \$77.60 Medium Pressure, Added to Outlet Charge (*) \$77.60 Froe Floor or Story) \$298.70 Comments  Processed By:  Date:  Receipt No.  Processed By:  Date:  Receipt No.  Receipt No.  Sas Systems  \$11.80 Low Pressure, Each Outlet \$77.60 Medium Pressure, Added to Outlet Charge (*) \$77.60 Sewer Connection C # \$11.80 Repair Drain Line, Per Fixture on Line \$77.60 Sewer Cap / Cesspool \$11.80 Rainwater System, For Each Drain Inside The Building \$11.80 Sump Pump / Sewer Ejector \$11.80 Rainwater System, For Each Drain Inside The Building \$11.80 Rainwater System, For Each Drain Inside The Building \$11.80 Sump Pump / Sewer Ejector \$11.80 Rainwater System, For Each Drain Inside The Building \$11.80 Cher (Refer to Fee Schedule)  Note: Any item having this mark (*) may require plan check for multi-family (3 or more units) & commercial buildings. (Any combination of 10 new fixtures; facilities requiring Health Dept. or Industrial Waste									
State License No.   Exp. Date   City License No.   Exp. Date   Sp. Date   S	E-Mail Address:								
\$89.50 Greater than 2 Bathrooms or Kitchen (Per Dwelling Unit)  Re-pipe (Non - Residential - Per Floor or Story) WATER SYSTEMS ONLY  \$89.50 Less Than 10,000 Sq. Ft. (Per Floor or Story)  \$89.50 Greater than 2 Bathrooms or Kitchen (Per Dwelling Unit)  Re-pipe (Non - Residential - Per Floor or Story)  \$89.50 Less Than 10,000 Sq. Ft. (Per Floor or Story)  \$89.50 Greater than 2 Bathrooms or Kitchen (Per Dwelling Unit)  \$89.50 Greater than 2 Bathrooms or Kitchen (Per Dwelling Unit)  \$89.50 Greater than 2 Bathrooms or Kitchen (Per Dwelling Unit)  \$89.50 Greater than 2 Bathrooms or Kitchen (Per Dwelling Unit)  \$89.50 Greater than 2 Bathrooms or Kitchen (Per Dwelling Unit)  \$89.50 Greater than 2 Bathrooms or Kitchen (Per Dwelling Unit)  \$89.50 Greater than 2 Bathrooms or Kitchen (Per Dwelling Unit)  \$89.50 Greater than 2 Bathrooms or Kitchen (Per Dwelling Unit)  \$89.50 Greater than 2 Bathrooms or Kitchen (Per Dwelling Unit)  \$89.50 Greater than 2 Bathrooms or Kitchen (Per Dwelling Unit)  \$89.50 Greater than 10,000 Sq. Ft. (Per Floor or Story)  \$89.50 Greater than 2 Bathrooms or Kitchen (Per Dwelling Unit)  \$89.50 Greater than 2 Bathrooms or Kitchen (Per Dwelling Unit)  \$89.50 Greater than 10,000 Sq. Ft. (Per Floor or Story)  \$89.50 Greater than 10,000 Sq. Ft. (Per Floor or Story)  \$89.50 Greater than 10,000 Sq. Ft. (Per Floor or Story)  \$89.50 Greater than 10,000 Sq. Ft. (Per Floor or Story)  \$89.50 Greater than 10,000 Sq. Ft. (Per Floor or Story)  \$89.50 Greater than 10,000 Sq. Ft. (Per Floor or Story)  \$89.50 Greater than 10,000 Sq. Ft. (Per Floor or Story)  \$89.50 Greater than 10,000 Sq. Ft. (Per Floor or Story)  \$89.50 Greater than 10,000 Sq. Ft. (Per Floor or Story)  \$89.50 Greater than 10,000 Sq. Ft. (Per Floor or Story)  \$89.50 Greater than 10,000 Sq. Ft. (Per Floor or Story)  \$89.50 Greater than 10,000 Sq. Ft. (Per Floor or Story)  \$89.50 Greater than 10,000 Sq. Ft. (Per Floor or Story)  \$89.50 Greater than 10,000 Sq. Ft. (Per Floor or Story)  \$89.50 Greater than 10,000 Sq. Ft. (Per Floor or Story)  \$89.50 Grea			Re-pipe	(Multi-Fa	mily Dwelling - Per Unit) WATER	R SYSTEMS ONLY			
Re-pipe (Non - Residential - Per Floor or Story) WATER SYSTEMS ONLY  \$89.50 Less Than 10,000 Sq. Ft. (Per Floor or Story) \$180.00 10,001 Sq. Ft 100,000 Sq. Ft. (Per Floor or Story) \$298.70 Greater Than 10,000 Sq. Ft. (P	State Linear No.   Francisco   Citation	No. IT. Det		\$72.20	2 Bathrooms or less or Kitche (Per	r Dwelling Unit)			
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\$89.50 Less Than 10,000 Sq. Ft. (Per Floor or Story) \$180.00   \$10,001 Sq. Ft.   100,000 Sq. Ft. (Per Floor or Story) \$298.70 Greater Than 100,000 Sq. Ft. (Per Floor or Story)  Plumbing Group \$234.00 Multi-Family or Mix Use: Kitchen & up to one Bathroom MalicS/Structure Use  Floor Above Grade Below Grade Mezz Type of Const.  Fire Sprinkler  Comments  Patients  P.C. Processed By: Date: Receipt No.  P.C. Approved By: Date: Receipt No.  Processed By: Date: Receipt No.  Saystems  \$30.10 Building Sewer \$30.10 Sewer Cap / Cesspool \$11.80 Repair Drain Line, Per Fixture on Line \$77.60 Sewer Cap / Cesspool \$11.80 Rainwater System, For Each Drain Inside The Building \$11.80 Rainwater System, Port Each Drain Inside The Building \$11.80 Rainwater System, Port Each Drain Inside The Building			Re-pine	Non - R	esidential - Per Floor or Story) \	WATER SYSTEMS ONLY			
## Standard Receipt No.  ## Standard Receipt N	Contractor's Signature	•			=				
## Secretar No.  ## Sec						-			
Plumbing Group   \$234.00   Multi-Family or Mix Use: Kitchen & up to one Bathroom   \$30.10   Multi-Family & Mix Use: Additional Bathrooms   \$30.10   Multi-Family & Multi-Family & Multi-Family & Multi-Family & Multi-Family & Mix Use: Additional Bathrooms   \$30.10   Multi-Family & Multi-Family & Multi-Family & Multi-Family & Multi-Family & Mix Use: Additional Bathrooms   \$30.10   Multi-Family & Multi-Family & Mix Use: Additional Bathrooms   \$30.10   Multi-Family & Mix Use: Additional Bathrooms   \$30.10   Multi-Family & Multi-Family & Mix Use: Additional Bathrooms   \$30.10   Multi-Family & Multi-Family & Multi-Family & Mix Use: Additional Bathrooms   \$30.10   Multi-Family & Multi-Family	EOR OFFICE USE	ONLY				=			
\$30.10 Multi-Family or Mix Use: Kitchen & up to one Bathroom \$30.10 Multi-Family & Mix Use: Additional Bathrooms    Saction		31121			Greater Inan 100,000 Sq. Ft. (Per	Floor or Story)			
Sand   Systems   Synchrol   Systems   Synchrol			Plumbii						
Salue   Salu	Tract NAICS/Structure	Use	<del></del>		•	!			
Flor Acrea   Type of Const.   Stitled   Street					Multi-Family & Mix Use: Additional	Bathrooms			
Sprinkler   Spri	Elect Above Grade Below Grade	Mezz Type of	———Gas Sy	stems					
Sprinkler   Edition of the Code   \$77.60   Medium Pressure, Added to Outlet Charge (*)   \$77.60   Proprietary System, Added to Outlets   \$30.10   Building Sewer   \$40.90   Sewer Connection C #   \$11.80   Repair Drain Line, Per Fixture on Line   \$77.60   Sewer Cap / Cesspool   \$77.60   Sewer Cap / Cesspool   \$11.80   Rainwater System, For Each Drain Inside The Building   \$18.30   Sump Pump / Sewer Ejector   \$8.30   Temperature and /or Pressure Relief Valve / Hi-Temp Limit Device   \$8.30   Temperature and /or Pressure Relief Valve / Hi-Temp Limit Device   \$0.00   \$0.0	1 1001	Type or		\$11.80	Low Pressure, Each Outlet				
Sprinkler  Comments  Drain & Waste Systems  \$30.10 Building Sewer  \$40.90 Sewer Connection C #  \$11.80 Repair Drain Line, Per Fixture on Line  P.C. Processed By:  P.C. Approved By:  Date:  Processed By:  Date:  Processed By:  Date:  Receipt No.  Sewer Cap / Cesspool  \$11.80 Rainwater System, For Each Drain Inside The Building  \$11.80 Sump Pump / Sewer Ejector				\$77.60	Medium Pressure, Added to Outle	t Charge (*)			
\$30.10 Building Sewer \$40.90 Sewer Connection C #  \$11.80 Repair Drain Line, Per Fixture on Line \$77.60 Sewer Cap / Cesspool \$11.80 Rainwater System, For Each Drain Inside The Building \$11.80 Sump Pump / Sewer Ejector \$11.80 Sump Pump / Sewer Ejector \$18.30 Sump Pump / Sewer Ejector \$8.30 Temperature and /or Pressure Relief Valve / Hi-Temp Limit Device \$11.80 Sump Pump / Sewer Ejector				\$77.60	Proprietary System, Added to Out	tlets			
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\$40.90 Sewer Connection C #  \$11.80 Repair Drain Line, Per Fixture on Line  \$77.60 Sewer Cap / Cesspool  \$11.80 Rainwater System, For Each Drain Inside The Building  \$11.80 Sump Pump / Sewer Ejector  \$11.80 Sump Pump / Sewer Ejector  \$18.30 Sump Pump / Sewer Ejector  \$8.30 Temperature and /or Pressure Relief Valve / Hi-Temp Limit Device  \$11.80 Sump Pump / Sewer Ejector				_					
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P.C. Processed By:    Date:						ine			
P.C. Approved By:    Date:	P.C. Processed By: Date:	Receipt No.			•	<del></del>			
Processed By  Date:  \$18.30 Sump Pump / Sewer Ejector  \$8.30 Temperature and /or Pressure Relief Valve / Hi-Temp Limit Device  \$0 Other (Refer to Fee Schedule)  Note: Any item having this mark (*) may require plan check for multi-family (3 or more units) & commercial buildings. (Any combination of 10 new fixtures; facilities requiring Health Dept. or Industrial Waste				• .	·	Inside The Ruilding			
Processed By Date: Receipt No. \$8.30 Temperature and /or Pressure Relief Valve / Hi-Temp Limit Device \$00 ther (Refer to Fee Schedule)  Note: Any item having this mark (*) may require plan check for multi-family (3 or more units) & commercial buildings. (Any combination of 10 new fixtures; facilities requiring Health Dept. or Industrial Waste	P.C. Approved By:	Date:	<u> </u>		•	Thiside the building			
Note: Any item having this mark (*) may require plan check for multi-family (3 or more units) & commercial buildings. (Any combination of 10 new fixtures; facilities requiring Health Dept. or Industrial Waste				٠.		iof Value / Hi Toma Limit Davis			
Note: Any item having this mark (*) may require plan check for multi-family (3 or more units) & commercial buildings. (Any combination of 10 new fixtures; facilities requiring Health Dept. or Industrial Waste	Processed By Date:	Receipt No.	] —	٠.	•				
				•	_	='			

INSPECTIONS	APPRVD	DATE	INSPECTIONS	APPRVD	DATE	
PRESITE						
SHORING						
SETBACKS AND YARDS						
UFER						
TRENCH AND FORMS REINFORCING STEEL						
SETBACK & ELEVATION SURVEY						
OK TO POUR FOOTINGS						
DO NOT POUR FOOTINGS UNT	IL ABOVE IS APF	PROVED				
OK TO GROUT CMU / P.I.P.						
OK REBAR SHOTCRETE WALL						
HVAC GROUNDWORK / U.F.						
ELECTRICAL GROUNDWORK / U.F.						
PLUMBING GROUNDWORK / U.F.						
GAS PIPING GROUNDWORK / U.F.						
FIRST FLOOR JOISTS						
UNDER FLOOR INSULATION						
OK TO POUR SLAB FLOOR						
DO NOT POUR CONCRETE FLOO	OR SLAB OR CO	VER FIRST				
FLOOR JOISTS UNTIL AE	OVE IS APPRO	VED				
ROUGH ELECTRIC						
ROUGH PLUMBING						
DUCTS						
ROUGH HEATING OR REFRIG.						
ROUGH GAS PIPING						
ROOF SHEATHING						
ROUGH FRAMING AND ROOF						
ALARM ROUGH						
FLOOR NAILING						
T-BAR Mechanical Electrical						
INSULATION						
OK TO COVER						
DO NOT COVER UNTIL AE	ROVE IS APPROV	FD				
	JOVE 10 AIT NOV					
DRYWALL						
BROWN COAT Interior Exterior						
SEWER - SEPTIC / TANK - CESSPOOL						
SERVICE RELEASE						
FINAL GAS						
FINAL PLUMBING						
FINAL ELECTRICAL						
FINAL HEATING OR REFRIGERATION						
ENERGY FINAL						
LANDSCAPE FINAL						
GRADING FINAL						
ELECTRICAL SERVICE RELEASE						
FINAL-ENGINEERING						
FINAL SPRINKLER						
FINAL CENTRAL STATION			OCCUPANCY OF THIS	OCCUPANCY OF THIS BUILDING BEFORE ALL		
FINAL FIRE ALARM			FINAL INSPECTIONS ARE MADE IS A VIOLATION			
FIRE PREVENTION FINAL			OF THE CITY OF GLENDALE MUNICIPAL CODE			
FINAL BUILDING INSPECTION				TORLE MORIOIFA		

PERMIT NO.

ADDRESS: